

## Briefing

### Kua Timata Te Haerenga | The Journey Has Begun Mental Health and Addiction Service Monitoring Report 2024: Access and Options

Date due to MO:	24/05/2024	Action required by:	31/05/2024
Security level:	UNCLASSIFIED	Briefing number:	BN2024-009
To:	Hon Matt Doocoy, Minister for Mental Health		
Copy to:	[REDACTED]		

### Contact for Telephone Discussion

Name	Position	Telephone
Karen Orsborn	Chief Executive	[REDACTED]
Sonya Russell	Director, Mental Health and Addiction Sector Leadership	[REDACTED]

### Minister's Office to Complete

- |  |                                    |   |
|--|------------------------------------|---|
| <input type="checkbox"/> Approved            | <input type="checkbox"/> Decline   | <input type="checkbox"/> Noted              |
| <input type="checkbox"/> Needs change        | <input type="checkbox"/> Seen      | <input type="checkbox"/> Overtaken by event |
| <input type="checkbox"/> See Minister's note | <input type="checkbox"/> Withdrawn |   |

Comment:

# Kua Timata Te Haerenga | The Journey Has Begun

## Mental Health and Addiction Service Monitoring Report 2024: Access and Options

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Security level: UNCLASSIFIED Date: 24/05/2024

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To: Hon Matt Doocey, Minister for Mental Health

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### Purpose of report

1. This briefing introduces *Kua Timata Te Haerenga | The Journey Has Begun - Mental Health and Addiction Monitoring Report 2024* (the report) and associated products in advance of publication.

### Summary

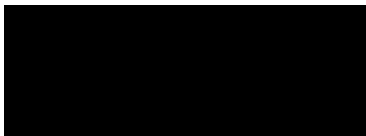
2. This is our 2024 monitoring report on mental health and addiction services. It monitors publicly funded mental health and addiction services and emergency responses over the five years from July 2018 to June 2023. The report specifically focuses on access to services and options available.
3. The report is supported by a Voices Report (thematic analysis of qualitative data gathered); an update to our online dashboard, and a series of infographics.
4. The report makes **calls to action** for system level changes which include increased access to services; increased choice of services; strengthened connections between services and across agencies, and improved data and insights.
5. The report also makes **five recommendations** which detail the 'who needs to do what'. We recommend that:
  - a. **Health NZ** develops a mental health and addiction workforce plan to address service capacity and workforce shortages by June 2025 (inclusive of clinical, peer and cultural workforces, Māori and lived experience leadership, and across primary, community, and specialist services).
  - b. **Health NZ** develops an action plan by June 2025 to meet the needs of Māori and whānau accessing specialist mental health and addiction services.
  - c. **Health NZ** provides guidance for the delivery of effective acute community options tailored to meet the needs of rangatahi and youth by June 2025.
  - d. **Health NZ** develops a mental health and addiction data plan by June 2025 that ensures information systems are integrated and enables collection of quality and timely data.
  - e. **Government** commits to funding a planned programme of work to collect mental health and addiction prevalence data by June 2025, to enable improved services and ensure value for money.

6. The report calls on the Government to continue its focus on mental health and addiction and accelerate progress toward a system that has people and whānau at its centre.
7. We will issue a media release and undertake pro-active media outreach alongside the publication. Key report findings will be shared via social media, and a webinar is also planned.
8. The findings align with your priorities, and we are available to meet with you to discuss the report prior to publication if required.

## Recommendations

We recommend you:

- |    |   |                 |
|----|---|-----------------|
| a) | <b>note</b> the monitoring report, Voices report, and updated dashboard will be published on 5 June 2024. | <b>Yes / No</b> |
| b) | <b>note</b> we are making five recommendations in the monitoring report, outlined in 5(a-e) above.        | <b>Yes / No</b> |
| c) | <b>note</b> we intend to release this briefing under our proactive release policy.                        | <b>Yes / No</b> |



Karen Orsborn  
Chief Executive  
Date: 24/05/2024

Hon Matt Doocey  
Minister for Mental Health  
Date:



# Kua Timata Te Haerenga | The Journey Has Begun

## Mental Health and Addiction Service Monitoring Report 2024: Access and Options

### Background / Context

9. Kua Timata Te Haerenga reports on publicly funded mental health and addiction services and emergency responses, shining the light on service access and options available over the five years from June 2018 to June 2023. The goal of the report was to further understand changing patterns in access to mental health and addiction services and the options available.
10. A wide amount of data and information (qualitative and quantitative) was analysed, reviewed, and considered in the development of this report, and is shared in the following companion reports:
  - a. **Dashboard:** Our online dashboard publicly reports on data in a visual format. It will include updated data to June 2023 on 68 measures across all 12 domains of our service monitoring framework He Ara Āwhina.
  - b. **Voices report:** The report provides more detail on the voices shared throughout our engagement, including kōrero about access, options, and other experiences of the wider mental health and addiction system. This Voices report includes a thematic analysis of what we heard from everyone, and a dedicated section of analysis on Māori voices. A copy of the report is available if requested.
  - c. **Infographics:** A series of three infographics highlight what is happening in our key advocacy areas – Kaupapa Māori services, young people, and coercive practices. These will summarise information already provided in Kua Timata Te Haerenga and the online dashboard.
11. The monitoring report, updated dashboard, and Voices report will be published on 5 June 2024. The three infographics will be released as a series in late June / early July 2024.

### What we see

12. The report highlights that psychological distress has continued to increase over the five-year monitoring period, likely exacerbated by societal changes driven by increased cost-of-living, changing expectations of the health system, serious weather events among other changes. The Covid-19 pandemic impacted service use, service delivery models, the workforce, and people's expectations of services. People faced barriers in accessing general practice and specialist services earlier, leading to a delayed response, by which time many were in crisis.
13. The report shows that service access has increased in some parts of the system but decreased in others. The Access and Choice programme has improved access for many

people with mild to moderate mental health and addiction needs. Other primary and community services showed more variable access patterns.

14. Access to specialist services has decreased, with people reporting challenges accessing these services. These changes in service use are due to the increasing complexity of needs in those accessing specialist services, along with increased pressure on specialist services due to workforce challenges.
15. The report reinforces the need for further strengthening the mental health and addictions system to better meet the needs and aspirations of Māori, and for a continued focus on youth and rangatahi.

### Changes we seek

16. The report makes calls to action, for the changes considered to be the most critical to improve the mental health and addiction system for tāngata whaiora and whānau.
17. We want to see **increased access to services**, by:
  - a. addressing gaps, particularly for people with moderate to severe needs.
  - b. ensuring services are acceptable, appropriate, and welcoming for Māori and continuing to invest in Kaupapa Māori services that are culturally grounded in mātauranga Māori.
  - c. developing and implementing strategies to reduce workforce vacancy rates, strengthen clinical workforces and reduce pressure on the workforce.
  - d. increasing and developing the workforce including further growing the peer and cultural workforces.
18. We want to see **increased choice of services**, through:
  - a. ensuring that people have what they need to understand the range of services available (including clear entry criteria), what they provide and how to access these.
  - b. increasing acute community options for people experiencing acute distress, including rangatahi and youth.
19. We want to see **strengthened connections**, through:
  - a. strengthening the interface between specialist and primary through primary care liaison functions and increasing opportunities for services to work collaboratively.
  - b. strengthening cross-agency work across all levels, from frontline services to Government agencies, to enable community and health services to work collaboratively to meet the health and social needs of those experiencing mental distress and harm from substance use.
20. We want to see **improved data and insights**, through:
  - a. improving quality data about the mental health and addiction system so we can understand if responses, services, and policy are meeting people's needs. Critical data improvements are required in outcome data, experience data, NHI linking across specialist and primary care, and data to better understand service capacity.

- b. working in partnership with Māori to explore better ways to report on Māori experiences and improve the governance and management of data relevant to Māori.
- c. updating prevalence data to determine how this has changed since Te Rau Hinengaro: The New Zealand Mental Health Survey (Oakley Browne et al., 2006) as this is needed to inform modelling of current and future demand.

## Recommendations

- 21. The report makes five specific recommendations, which detail more specific aspects of change that we want to see, with a 'who does what, by when' focus. Four of these recommendations are directed at Health NZ, and one is directed at Government.
  - a. **Health NZ** develops a mental health and addiction workforce plan to address service capacity and workforce shortages by June 2025 (inclusive of clinical, peer and cultural workforces, Māori and lived experience leadership, and across primary, community, and specialist services).
  - b. **Health NZ** develops an action plan by June 2025 to meet the needs of Māori and whānau accessing specialist mental health and addiction services.
  - c. **Health NZ** provides guidance for the delivery of effective acute community options tailored to meet the needs of rangatahi and youth by June 2025.
  - d. **Health NZ** develops a mental health and addiction data plan by June 2025 that ensures information systems are integrated and enables collection of quality and timely data.
  - e. **Government** commits to funding a planned programme of work to collect mental health and addiction prevalence data by June 2025, to enable improved services and ensure value for money.

## How we will influence change

- 22. Following the publication of this report, we will continue engaging with the mental health and addiction sector and lived experience communities to better understand the experiences behind the numbers and to determine the best way to progress the changes we seek.
- 23. We will continue monitoring.
  - a. Our next monitoring report will provide an update on the implementation of the Access and Choice programme over the five-year roll out to June 2024.
  - b. We will advance our dashboard to support alignment with forthcoming mental health and addiction sector targets where possible. The added value of our dashboard is positioning targets alongside a broader set of measures to provide important context, interpretation, and balancing measures.
  - c. We will further improve our He Ara Āwhina measure set. In particular, we will work with Māori (lived experience and service providers) to improve data to support monitoring Te Ao Māori domains of He Ara Āwhina.

- d. We intend to further investigate specialist mental health and addiction services, for publication in 2025/26.
- 24. We will continue advocating for actions, drawing on our monitoring and engagement, that will make a real difference for tāngata whaiora and whānau.
- 25. We will continue to engage on the recommendations we have made and monitor progress against these recommendations.
- 26. Having a dedicated Minister for Mental Health presents many opportunities to drive change, and we look forward to advising you, and supporting your leadership in the mental health and addiction sector.

## Equity

- 27. The report highlights the continued importance of appropriate services and choice for Māori and young people and rangatahi. There are specific sections focused on bringing together key findings for Māori (section 4.1) and for rangatahi and youth (section 4.2) which highlight higher and more specific needs. The online dashboard also presents data for other priority population groups such as Pacific peoples and Asian.

## Communications Plan

- 28. A high-level communications plan is attached for your information. Key points are:
  - a. A media release and LinkedIn post will be made alongside publication on our website.
  - b. A webinar introducing the key findings and call to actions and next steps is planned for late June.
  - c. We will focus on sharing this report with key decision makers in government and the mental health and addiction system.
  - d. Hayden Wano, Board Chair, and Karen Orsborn, Chief Executive, will be the primary spokespeople for any media interest.

## Consultation

- 29. The report has been through a rigorous peer review process followed by an independent review. The Ministry of Health and Health NZ have reviewed the report for factual accuracy purposes. We have engaged with key leaders in the sector (including clinical and lived experience) to develop this monitoring report.

## Next Steps

- 30. The final publication-ready monitoring report will be shared with your office before the publication date.
- 31. Subject to minor editorial and design changes, the monitoring report, Voices report, and updated dashboard will be published on 5 June 2024.



32. The accompanying series of three infographics will be released following the report's publication.

**ENDS**

